## CORRECTED FISCAL NOTE

# HB 368 - SB 521

March 9, 2005

**SUMMARY OF BILL:** Requires health care service providers caring for patients with diabetes, hypertension or a family history of kidney disease to counsel regarding chronic kidney disease, test for chronic kidney disease and ensure that consulting laboratories provide reports calculating an estimated glomerular filtration rate on every serum creatinine performed. Authorizes the Commissioner of Health to promulgate rules and regulations to assure that providers and laboratories comply with law.

### **ESTIMATED FISCAL IMPACT:**

On February 22, 2005, we issued a fiscal note which indicated that there would be a *not significant increase in state expenditures*. Based on additional information provided by the Bureau of TennCare, the estimated fiscal impact of this bill is:

### (Corrected)

Increase State Expenditures – Exceeds \$35,800

Other Impact – Increase Federal Expenditures – Exceeds \$64,200

### Assumptions:

- The Department of Health will not incur a significant impact on expenditures for promulgating rules and regulations.
- The Bureau of TennCare will incur a significant increase of both state and federal expenditures exceeding \$100,000 due to the increase in the number of tests performed surpasses the current practice guidelines.

### **CERTIFICATION:**

This is to duly certify that the information contained herein is true and correct to the best of my knowledge.

James W. White, Executive Director

**HB 368 - SB 521 (CORRECTED)**